

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application No./Patent No.:	10/010,018
	Filed/Issue Date:	December 5, 2001
	First Named Inventor	Paul MASTER
	Group Art Unit	2686
	Examiner Name	Joy Kimberly Contee
	Attorney Docket Number	046301-016000

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

22204

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number:

22204

OR

Firm or Individual Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Gordon Campbell President and CEO QST Holdings, LLC
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Signature

Date

9 - 25 - 07

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see blow*.

*Total of _____ forms are submitted.